San Francisco
County Transportation
Authority

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Memorandum

AGENDA ITEM 9

DATE: June 18, 2026

TO: Transportation Authority Board

FROM: Carl Holmes – Deputy Director, Capital Projects

SUBJECT: 7/14/2026 Board Meeting: Adopt the Laguna Honda Gondola Feasibility Study Final Report

RECOMMENDATION ☐ Information ☒ Action

Adopt the Laguna Honda Gondola Feasibility Study Final Report

SUMMARY

The Laguna Honda Gondola Feasibility Study evaluates whether an aerial gondola could provide a safe, ADA-accessible, and reliable connection between the Forest Hill Muni Metro Station and the Laguna Honda Hospital and Rehabilitation Center, which is being planned for future residential development. The study team analyzed existing conditions, reviewed the current shuttle, assessed travel demand, and evaluated gondola alignment alternatives.

Following development of the gondola alignment and system concept, demand projections and capital and operating cost estimates and a conceptual evaluation of the shuttle alternative, the study team concludes that while a gondola system is technically feasible, its relatively high capital and operating costs for the short distance at this location makes alternative mobility solutions – such as enhanced shuttle service paired with effective demand management programs – the more cost-effective approach to supporting future growth at the Laguna Hospital and residential development sites.

☐ Fund Allocation
☐ Fund Programming
☐ Policy/Legislation
☐ Plan/Study
☒ Capital Project Oversight/Delivery
☐ Budget/Finance
☐ Contract/Agreement
☐ Other: _____

BACKGROUND

The Laguna Honda Gondola Feasibility Study (Study) was initiated at the request of Chair Melgar to assess mobility options supporting planned future development at the Laguna Honda Hospital and Rehabilitation Center (Hospital) campus.

The study evaluated whether an aerial gondola system could provide a safe, ADA-accessible, and reliable connection between the Forest Hill Muni Metro Station (Station) and the Hospital, addressing significant accessibility barriers created by steep topography.

The study was led by the Transportation Authority with support from Kimley-Horn and Associates, and conducted in coordination with the San Francisco Department of Public Health and SFMTA.

Project Purpose. The purpose of the Study is to explore the feasibility of an aerial gondola system as a potential way to enhance ADA access and improve first- and last-mile connectivity between the Forest Hill Muni Metro Station and the Hospital in the Forest Hill neighborhood of San Francisco, supporting current demand and future residents and visitors as anticipated with planned growth. The gondola would address a significant accessibility challenge created by steep topography.

In addition to serving hospital staff, patients, and visitors, the gondola could improve access to the proposed affordable senior housing development at the Laguna Honda Hospital Campus Replacement Lot (Campus Replacement Lot Project).

This study provides a technical feasibility level evaluation of a proposed gondola system. The study team identified key constraints, opportunities, benefits, and costs associated with a gondola system.

DISCUSSION

Study Approach. To evaluate the technical feasibility of a gondola connection the study team analyzed existing conditions that include a shuttle service provided and supported by the Hospital (with monthly ridership of ~2,500), reviewed precedent systems from elsewhere, considered future travel demand, and developed and compared six potential alignment alternatives. The feasibility analysis incorporated site visits; collision, transit, and shuttle ridership data; hospital growth plans; and information about historic resources. The study team also conducted a market assessment to estimate demand, evaluated alignment alternatives to determine the

most feasible gondola option based on mobility needs and site constraints, and incorporated cost estimates from two ropeway suppliers.

Demand Analysis. The study team applied two demand scenarios to walking and transit trips estimated by Replica to project gondola demand. Replica was queried for trips with an origin or destination activity within the study area (the Station parcel and the Hospital parcel). The existing mode share scenario reflects observed shuttle ridership as a share of walking and transit trips, representing current demand for a direct connection between the Station and Hospital. The higher mode share scenario reflects a reasonable upper-bound increase in demand, assuming a gondola would attract a broader user base than the existing shuttle given its greater accessibility, reliability, and visibility.

Key demand findings are:

- Existing demand is estimated at approximately 135 average weekday trips (existing mode share scenario) to 270 average weekday trips (higher mode share scenario).
- Future demand (by 2030, accounting for planned campus development) is estimated at approximately 195 average weekday trips (existing mode share scenario) to 390 average weekday trips (higher mode share scenario), with approximately 20–39 trips occurring in the peak hour.
- Approximately 70% of demand is associated with the Hospital Pavilion Building, where the majority of residents and staff are located.

Alignment Evaluation. Six alignment alternatives were developed and evaluated across five criteria: demand served, utility conflicts, space and constructability, environmental and site impacts, and access and circulation. The alternatives are summarized below:

- Alternative 1A - Station to Administrative Building: Serves lower-demand destination; conflicts with overhead utilities and has constrained space near the historic Station.
- Alternative 1B - Station to Pavilion Building: Serves higher-demand destination but shares utility and space constraints with 1A and crosses a mature tree grove.

- Alternative 2A - Woodside Avenue to Administrative Building: Avoids Station-area constraints but requires a pedestrian bridge across Laguna Honda Boulevard; serves lower-demand building.
- Alternative 2B - Trailhead to Administrative Building: Avoids utility conflicts; however, serves lower-demand Administrative Building.
- Alternative 2C - Trailhead to Pavilion Building (feasibly recommended): Directly serves the Pavilion Building (highest demand), avoids major utility conflicts, minimizes Station-area constraints, and does not require a pedestrian bridge. Tree and vegetation impacts are manageable.
- Alternative 2D - Bus Stop to Pavilion Building: Serves high-demand destination; however, the bus stop location may have limited space for a gondola terminal.
- Alternative 2C was identified as the most feasibly recommended alignment and was advanced for further design development, including horizontal and vertical alignment refinement. A southern sub-alignment was selected within Alternative 2C to minimize tree impacts while maintaining constructability.

Planning-Level Cost Estimate. The study team obtained cost estimates from two ropeway system manufacturers, Doppelmayr and Leitner Poma, and developed supplemental estimates for civil infrastructure, including boarding platforms, intersection improvements, and crosswalk treatments along Laguna Honda Boulevard. The combined planning-level cost estimate for the most feasible alignment is summarized below:

Table 1. Planning-Level Cost Estimate for the Most Feasible Alignment

Cost Item	Estimated Cost
Capital Cost: Ropeway System, Station Improvements & Civil Improvements (incl. 30% contingency; YOE 2030)	~$17M
Soft Costs: Design, Environmental, Permitting, Construction Management (40% of capital; YOE 2028)	~$6M
Total Estimated Implementation Cost	~$23M
Annual Operations & Maintenance Costs (starting 2030, includes on-board attendant)	Up to ~$2M/year

Shuttle Comparative Analysis and Key Findings. The current shuttle services have an annual cost of $300,000. The study team conducted a comparative analysis (cost,

capacity, service, and frequency) of the gondola system against the existing shuttle service as an alternative mobility solution.

Key findings are summarized as follows:

Feasibility: A gondola connection is technically feasible and could provide a fully accessible, grade-separated link between the Station and Hospital. The most feasible alignment minimizes utility conflicts and directly serves the Pavilion Building, the Hospital's highest-demand destination.

Demand: Travel demand is driven primarily by growth in anticipated Hospital staff and residents. There is some potential for induced gondola demand from non-Hospital trips (serving nearby neighborhoods or Twin Peaks scenic areas), which this study did not assess.

Cost: Capital and operating costs are significant for serving projected ridership with a gondola, in comparison with lower-cost mobility services such as shuttles and transportation demand management (TDM) strategies. Analysis of the shuttle and gondola options over a 20-year horizon (3% real discount rate) suggests the gondola option would be significantly more costly than a shuttle service - up to 7x higher on a lifecycle basis.

Capacity: While a gondola would provide twice as much capacity, a shuttle system would generally have the ability to serve planned Hospital trip growth more cost effectively, though peak-hour conditions or additional non-Hospital trip growth may warrant additional demand management strategies (e.g. carpool incentives) or shuttle services.

Planning and Design Parameters: The Study's documentation of key gondola design parameters, planning factors and lifecycle costs can inform longer-distance gondola systems planning, if applicable elsewhere in the future.

Study Conclusions. Following development of the gondola alignment and system concept, demand projections and capital and operating cost estimates and a conceptual evaluation of the shuttle alternative, the study team concludes that the gondola is a less cost-effective solution than developing shuttle and TDM strategies, and does not recommend further study of a gondola concept for the Laguna Honda site.

While the Study confirms that a gondola system is technically feasible, its relatively high capital and operating costs for the short distance at this location makes

alternative mobility solutions – such as enhanced shuttle service paired with effective demand management programs – the more cost-effective approach to supporting future growth at the Laguna Hospital and residential development sites at this time.

While the Study confirms that a gondola system is technically feasible, its relatively high capital and operating costs for the short distance at this location makes alternative mobility solutions – such as enhanced shuttle service paired with effective demand management programs – the more cost-effective approach to supporting future growth at the Laguna Hospital and residential development sites at this time.

FINANCIAL IMPACT

The recommended action would not have an impact on the proposed Fiscal Year 2026/27 budget. Allocation of funds to support advancement and implementation of study recommendations is subject to future Board action.

CAC POSITION

The CAC will consider this item at its June 24, 2026 meeting.

SUPPLEMENTAL MATERIALS

- Attachment 1 – Executive Summary
- Enclosure – Draft Final Report

1. Executive Summary

The Laguna Honda Gondola Feasibility Study evaluates whether an aerial gondola could provide a safe, ADA-accessible, and reliable connection between the Forest Hill Muni Metro Station (Station) and the Laguna Honda Hospital and Rehabilitation Center (Hospital) which is being planned for future residential development. Today, steep topography, an indirect ADA accessible pedestrian route, and traffic volumes on Laguna Honda Boulevard create significant barriers for hospital staff, residents, patients, and visitors traveling between these two sites. This study was initiated at the request of Transportation Authority Chair and District 7 Commissioner Myrna Melgar to help assess mobility options to support future development.

To assess the viability of a gondola connection, the study team analyzed existing conditions that include a shuttle service provided and supported by the Hospital (with monthly ridership of ~2,500), reviewed precedent systems from elsewhere, considered future travel demand, and developed and compared six potential alignment alternatives. The feasibility analysis incorporated site visits; collision, transit, and shuttle ridership data; hospital growth plans; and information about historic resources.

1.1 DEMAND ANALYSIS

For the demand analysis, the study team used Replica, an activity-based travel demand platform that applies a disaggregate travel forecasting framework to simulate individual and household daily activity patterns and derive resulting travel behavior from large-scale anonymized mobility data. The study team evaluated two scenarios – an existing demand scenario assumes that approximately 10% of transit and walking trips would use the gondola, reflecting current shuttle ridership patterns. A higher mode share scenario assumes that approximately 20% of transit and walking trips would use the gondola. The resulting potential demand is approximately 135 – 270 average weekday trips today, increasing to approximately 195 – 390 trips by 2030 with planned development on the Hospital campus. Approximately 70% of this demand is associated with the Hospital Pavilion Building, where most residents and staff are located and an additional 460 staff are expected to be located.

1.2 ALIGNMENT EVALUATION

Six alignment alternatives were developed based on potential launch points near the Station and potential landing points at the Hospital. Alternatives were evaluated for constructability, utility conflicts, environmental constraints, accessibility, and ability to serve primary demand. The analysis identified an alignment serving the Hospital Pavilion Building as the most feasible option, offering the best balance of demand served, constructability, and minimizing conflicts with utilities, trees, and historic resources.

1.3 COST ASSESSMENT

The study team developed rough order-of-magnitude cost estimates, informed by two ropeway manufacturers and civil infrastructure assumptions. The analysis estimates a total implementation cost of approximately $23 million in year of expenditure dollars, which is assumed to be 2028 for soft costs and 2030 for capital costs, with annual operations and maintenance costs of approximately $2 million per year, including an on-board attendant on the gondola, for 10 years, starting in 2030.

1.4 SHUTTLE COMPARATIVE ANALYSIS

The current shuttle services have an annual cost of $300,000. Comparative analysis of the gondola system and shuttle alternative yielded the following findings:

- **Cost:** The gondola option carries a significant cost premium – estimated at ~7x over a 20 year lifecycle – compared with a shuttle service.
- **Capacity:** While a gondola would provide twice the capacity of the shuttle, the shuttle service would generally have adequate capacity to serve future demand growth scenarios resulting from planned Hospital growth. Peak hour conditions under the higher-growth scenario or additional non-Hospital trip growth may strain shuttle capacity and warrant additional demand management strategies (e.g. carpool incentives) or shuttle services.
- **Service coverage:** The shuttle provides door-to-door service to multiple buildings. The gondola drops passengers at the end of the hospital steps, requiring an additional walk to reach individual buildings.
- **Frequency:** The gondola's five-minute cycle compares favorably to the shuttle's 15- to 20-minute cycle. However, gondola walk times to final destinations might make total times closer to equal.

1.5 KEY FINDINGS

- A gondola connection is technically feasible and could provide a fully accessible, grade-separated link between the Station and Hospital.
- The most feasible alignment minimizes utility conflicts and directly serves the Pavilion Building, the Hospital's highest-demand destination.
- Travel demand is driven primarily by growth in anticipated Hospital staff and residents. There is some potential for induced gondola demand from non-Hospital trips (serving nearby neighborhoods or Twin Peaks scenic areas), which this study did not assess.

- Capital and operating costs are significant for serving projected ridership with a gondola, in comparison with lower-cost mobility services such as shuttles and transportation demand management (TDM) strategies.
- While a gondola would provide significantly more capacity, a shuttle system would generally have the ability to serve planned Hospital trip growth more cost effectively, though peak-hour conditions or additional non-Hospital trip growth may warrant additional demand management strategies (e.g. carpool incentives) or shuttle services.
- The study's documentation of key gondola design parameters, planning factors and lifecycle costs can inform longer-distance gondola systems planning, if applicable elsewhere in the future.

1.6 HOSPITAL AND MOBILITY PROGRAM OUTREACH

Given the technical nature of this study, the main outreach tasks were limited to consulting hospital administrators, shuttle service providers and transportation staff at partner agencies. The study team also conducted cost research with gondola suppliers.

1.7 CONCLUSION

Following development of the gondola alignment and system concept, demand projections and capital and operating cost estimates and a conceptual evaluation of the shuttle alternative, the study team concludes that the gondola is a less cost-effective solution than developing shuttle and TDM strategies, and does not recommend further study of a gondola concept for the Laguna Honda site.

While the Study confirms that a gondola system is technically feasible, its relatively high capital and operating costs for the short distance at this location makes alternative mobility solutions – such as enhanced shuttle service paired with effective demand management programs – the more cost-effective approach to supporting future growth at the Laguna Hospital and residential development sites at this time.